# MAINE STATE LEGISLATURE

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### STATE OF MAINE 114TH LEGISLATURE FIRST REGULAR SESSION



# BILL SUMMARY JOINT STANDING COMMITTEE ON HUMAN RESOURCES

**JULY 1989** 

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## ONE HUNDRED AND FOURTEENTH LEGISLATURE FIRST REGULAR SESSION

JOINT STANDING COMMITTEE
BILL SUMMARIES
AUGUST 1989

This document is a compilation of the bill summaries prepared by this office for the Joint Standing Committees and Joint Select Committees of the Maine Legislature. The summaries are arranged by LD number for each committee.

All Adopted Amendments are listed, by paper number (e.g., H-584 or S-222), together with the sponsor for floor amendments. Final action is listed to the right of the title. If final House and Senate action differ, both are listed. Committee Reports and Floor Action are abbreviated as follows:

OTP	Ought to Pass
OTP-ND	Ought to Pass in New Draft
OTP-ND-NT	Ought to Pass in New Draft, New Title
OTP-A	Ought to Pass as Amended
ONTP	Ought Not to Pass
LVWD	Leave to Withdraw
INDEF PP	Indefinitely Postponed

Each individual summary was prepared by the analyst assigned, as noted for each committee. But, this document was produced by the efforts of all the office staff, including Research Assistant Barbara McGinn, and secretaries: Charlene Brann, and Valarie Parlin, and especially Laurette Knox who coordinated preparation of the overall document.

Please give us your suggestions and comments on these summaries and tell us of any inaccuracies.

to give an informed consent to treatment. The proposal is based on the law in effect since 1986 in Michigan. It requires physicians to provide breast cancer patients with oral information and written materials explaining alternative methods of treatment. These materials could be either a standardized written summary developed by the Bureau of Health or a brochure obtained through organizations such as the National Cancer Institute or the American Cancer Society. Failure of a physician to abide by the provisions of this bill could result in disciplinary action by the Board of Registration in Medicine or the Board of Osteopathic Examination and Registration. Patients receiving information as required by this bill would be barred from bringing a civil action against the physician for failure to obtain informed consent by failing to provide information on alternative forms of treatment. Nothing in this section is intended to restrict or limit the rights of a patient under common law.

### LD 313 An Act to Expand the Types of Medication Included in the Elderly Low-cost Drug Program

PUBLIC 563

SPONSOR(S)COMMITTEE REPORTAMENDMENTS ADOPTEDDOREOTPH-61MANNINGBURKES-422PEARSON

#### SUMMARY

This bill includes anticoagulent drugs in the elderly low-cost drug program.

LD 320 An Act to Increase the License Fees for Hospitals and Long-

PUBLIC 136

term Care Facilities

SPONSOR(S) COMMITTEE REPORT AMENDMENTS ADOPTED

PERKINS OTP-AM S-61

DIPIETRO PINES

#### <u>SUMMARY</u>

LD 340

The original bill would change licensing fees for operating a hospital or nursing home to \$5 per bed. The Committee Amendment (S-61) increases the fees to \$10 per bed. It also expands licensing provisions to include state hospitals and nursing homes, but exempts state hospitals from paying licensing fees.

### Low-cost Drug Recipients

CARRY OVER EMERGENCY

<u>SPONSOR(S)</u> <u>COMMITTEE REPORT</u> <u>AMENDMENTS ADOPTED</u>

An Act to Revise the Eligibility Requirements for Elderly

BERUBE GILL CHONKO PERKINS

#### SUMMARY

This bill would change income eligibility levels for the elderly low-cost drug program. It was rereferred to the Appropriations Committee.

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